

EXECUTIVE LOBBYING EXPENDITURE REPORT
FORM 507

- ☐ COVERING JANUARY 1 - JUNE 30, _____ - DUE AUGUST 15
☒ COVERING JANUARY 1 - DECEMBER 31, 2007 - DUE FEBRUARY 15

Mail to: the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808
OR
Fax to: (225)763-8787 or (225)763-8780

95
Executive Lobbyist Registration No.

FOR OFFICE USE ONLY
Postmark Date: 4/17/08

3070832

1. Name McKearn Kristy G
Last First MI

2. Business Address: 301 North Main St, Suite 810, BR, LA 70825
Street and No. City State Zip

Mailing Address Same

3. Business Phone 225-381-7028
Area Code and Telephone Number

4. Total of all executive lobbying expenditures made January 1 through June 30: \$ 200.79
(Include expenditures from Schedules A and B)

5. Total of all executive lobbying expenditures made July 1 through December 31: \$ 0
(When Applicable) (Include expenditures from Schedules A and B)

6. Total of all executive lobbying expenditures made during calendar year: \$ 200.79
(Line 4 added to Line 5 should equal Line 6)

7. Did you make an expenditure exceeding \$50 on one occasion for an executive branch official:

From January 1 through June 30?
From July 1 through December 31?

Yes ☒ No ☐
Yes ☐ No ☒ NA ☐

If the answer to either question in Number 7 above is YES, complete Schedule A and attach.

8. Did you make expenditures exceeding the sum of \$250 for an executive branch official:

From January 1 through June 30?
From July 1 through December 31?

Yes ☐ No ☒
Yes ☐ No ☒ NA ☐

If the answer to either question in Number 8 above is YES, complete Schedule A and attach.

9. Did you expend funds for any reception, social gathering, or other function to which more than twenty-five executive branch officials were invited during this reporting period?

Yes ☐ No ☒

If the answer to Number 9 above is YES, complete Schedule B and attach.

EXECUTIVE LOBBYING EXPENDITURE REPORT



10. PROVIDE BELOW (a) the name of the executive branch department as listed in the executive branch schedule; (b) the aggregate total of all expenditures attributable to the department made during the January 1 - June 30 reporting period; (c) the aggregate total of all expenditures attributable to the department made during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year attributable to the department.

- 1) a. Name of Department: Department of Health and Hospitals
 b. Total of all expenditures made January 1 through June 30: \$ 200.79
 c. Total of all expenditures made July 1 through December 31: \$ 0
 (When applicable)
 d. Total of all expenditures made during the calendar year: \$ 200.79

- 2) a. Name of Department: _____
 b. Total of all expenditures made January 1 through June 30: \$ _____
 c. Total of all expenditures made July 1 through December 31: \$ _____
 (When applicable)
 d. Total of all expenditures made during the calendar year: \$ _____

- 3) a. Name of Department: _____
 b. Total of all expenditures made January 1 through June 30: \$ _____
 c. Total of all expenditures made July 1 through December 31: \$ _____
 (When applicable)
 d. Total of all expenditures made during the calendar year: \$ _____

11. PROVIDE BELOW (a) the name of the executive branch department and the individual agency as listed in the executive branch schedule; (b) the aggregate total of all expenditures attributable to the agency made during the January 1 - June 30 reporting period; (c) the aggregate total of all expenditures attributable to the agency made during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year attributable to the agency.

- 1) a. Name of Department and Individual Agency: Department of Health and Hospitals (Medicaid)
 b. Total of all expenditures made January 1 through June 30: \$ 200.79
 c. Total of all expenditures made July 1 through December 31: \$ 0
 (When applicable)
 d. Total of all expenditures made during the calendar year: \$ 200.79

2) a. Name of Department and Individual Agency: _____

b. Total of all expenditures made January 1 through June 30: \$ _____

c. Total of all expenditures made July 1 through December 31: \$ _____
(When applicable)

d. Total of all expenditures made during the calendar year: \$ _____

3) a. Name of Department and Individual Agency: _____

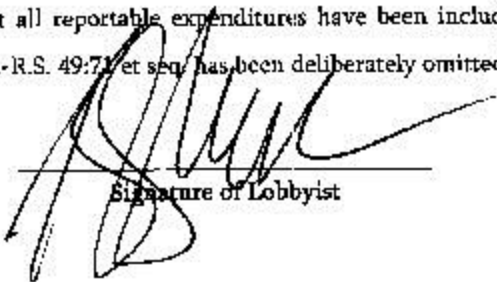
b. Total of all expenditures made January 1 through June 30: \$ _____

c. Total of all expenditures made July 1 through December 31: \$ _____
(When applicable)

d. Total of all expenditures made during the calendar year: \$ _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.



Signature of Lobbyist

SCHEDULE A: EXPENDITURES FOR EXECUTIVE BRANCH OFFICIALS

This schedule must be completed if you answered YES to either question 7 or 8 on the Executive Lobbying Expenditure Report. If, during the period January 1 through June 30 or the period July 1 through December 31, you made either a) an expenditure for any executive branch official exceeding \$50 on any one occasion or b) aggregate expenditures exceeding \$250 for any one executive branch official during a reporting period, then you must provide the aggregate total of expenditures made on that individual in that reporting period. NOTE: Report covering July - December is cumulative. You must include reportable expenditures from the first half of the year in Column #3.

1. EXECUTIVE OFFICIAL'S NAME	2. OFFICIAL'S AGENCY AS LISTED IN THE EXECUTIVE BRANCH SCHEDULE	3. AMOUNT OF EXPENDITURES MADE ON AN OFFICIAL FOR WHOM YOU EITHER SPENT OVER \$50 ON ONE OCCASION OR MADE EXPENDITURES EXCEEDING \$250 BETWEEN JANUARY 1 AND JUNE 30	4. AMOUNT OF EXPENDITURES MADE ON AN OFFICIAL FOR WHOM YOU EITHER SPENT OVER \$50 ON ONE OCCASION OR MADE EXPENDITURES EXCEEDING \$250 BETWEEN JULY 1 AND DECEMBER 31	5. TOTAL OF COLUMNS 3 AND 4
Jerry Phillips	LA. Dept. of Health and Hospitals	200.79	0	200.79